

# Austin Lobby Quarterly Activity Report Cover Sheet

FORM QAR  
COVER SHEET

1 LOBBYIST NAME	TITLE; FIRST; MI		PAGE # 5											
	LAST; SUFFIX Workers Defense Action Fund		ACCOUNT # 00090612											
2 EMPLOYING ENTITY	Entity/Organization Name		<b>OFFICE USE ONLY</b> Date Received ELECTRONICALLY FILED 07/12/2021 Receipt # <table border="1"> <tr> <td>HD / PM</td> <td>Amount</td> </tr> </table> Date Processed Date Imaged		HD / PM	Amount								
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3 LOBBYIST PERMANENT BUSINESS STREET ADDRESS	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE  5604 Manor Road   Austin, TX 78723													
4 LOBBYIST BUSINESS MAILING ADDRESS	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE  5604 Manor Road   Austin, TX 78723													
5 LOBBYIST REGISTERED UNDER BUSINESS ENTITY	<table border="1"> <thead> <tr> <th>Lobbyist Name</th> <th>Lobbyist Id</th> </tr> </thead> <tbody> <tr> <td>Gharakhanian, Stephanie A.</td> <td>00090638</td> </tr> <tr> <td>Gonzalez, Ana</td> <td>00090642</td> </tr> <tr> <td>Huerta, Mayra</td> <td>00090647</td> </tr> <tr> <td>Timm, Emily</td> <td>00090689</td> </tr> <tr> <td>Wolff, Jessica</td> <td>00090695</td> </tr> </tbody> </table>		Lobbyist Name	Lobbyist Id	Gharakhanian, Stephanie A.	00090638	Gonzalez, Ana	00090642	Huerta, Mayra	00090647	Timm, Emily	00090689	Wolff, Jessica	00090695
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## Business Entity- No Additional Reportable Information

<b>1</b> LOBBYIST NAME Workers Defense Action Fund	<b>2</b> LOBBYIST ID 00090612	<b>3</b> Total pages Schedule Municipla Question:  Sch: 1/1 Rpt: 2/5
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This information serves as the electronic signature of the person legally responsible for filing this report.

☒ Under penalty of perjury, I swear or affirm that I have no additional registration information or activity to report beyond the information reported by the employee lobbyist(s) registered on behalf of my business entity pursuant to City Code, Chapter 4-8. I affirm that with the exception of activity reported separately by the employee lobbyists of the entity, during this reporting period, the entity has no reportable activity in regard to the previous calendar quarter, as defined by the conditions below.

The entity received no Client Compensation or Reimbursement for lobbying aside from the compensation or reimbursement (if any) reported by its employee lobbyists this reporting period. (City Code Section 4-8-6(A)(2)).

The entity made no Expenditures for lobbying aside from expenditures (if any) reported by its employee lobbyists this reporting period. (City Code Section 4-8-6(A)(3)).

Aside from what was reported by its employee lobbyists for the previous calendar quarter, the entity did not exchange money, goods, services, or anything of value totaling \$500 or more with a business entity in which a city official is a proprietor, partner, director, officer, manager, employer, or employee, or in which a city official has substantial economic interest. (City Code Section 4-8-6(A)(4)).

Workers Defense Action Fund

Signature of Filer

# Austin Lobby Quarterly Activity Report Expenditure Totals

FORM QAR  
SCHEDULE Expenditure Totals

1 LOBBYIST NAME Workers Defense Action Fund		2 LOBBYIST ID 00090612	3 Total pages Schedule Expenditure Totals:  Sch: 1/1 Rpt: 3/5
4 EXPENDITURE TOTALS	Reimbursements to Others	\$	
	Food & Beverages	\$	
	Transportation & Lodging	\$	
	Gifts	\$	
	Entertainment	\$	
	Awards & Mementos	\$	
	Honorariums	\$	
	Made for the Attendance of Council Members at Charitable Events or Fundraisers	\$	
	Media Communications	\$	
Payments to Persons Assisting with Media Communications (Political Strategists, Pollsters, Consultants, etc.)	\$		

**Austin Lobby Quarterly Activity Report Termination Notice**  
**Lobbyist Quarterly Activity Report**

1 LOBBYIST NAME Workers Defense Action Fund	2 LOBBYIST ID 00090612	3 Total pages Schedule Report Termination:  Sch: 1/1 Rpt: 4/5
4 TERMINATING REPORT	<input type="checkbox"/> Terminate your registration with this activity report	

# Austin Lobby Quarterly Activity Report File Declaration-Business

## Lobby Activity

### AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

I acknowledge that I am the authorized officer, representative, or agent of business entity on whose behalf I am reporting.

Under penalty of perjury, I swear or affirm that the facts provided in this report are true and correct to the best of my knowledge and belief and include all information required to be reported by the business entity registrant pursuant to City Code Chapter 4-8.

I understand that pursuant to Section 4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

Workers Defense Action Fund

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Signature of Filer